

W1900006349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

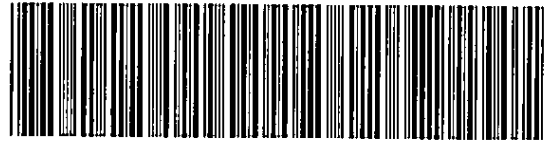
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W19000051526

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Y SCOTT

JUL 1 2019





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 29, 2019

CHRISTOPHER CHASE  
P.O. BOX 224  
ANGEL FIRE, NM 87710

SUBJECT: 24/7 AUTOMOTIVE PERFORMANCE LLC  
Ref. Number: W19000051526

We have received your document for 24/7 AUTOMOTIVE PERFORMANCE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Yvette Scott  
Document Specialist II

Letter Number: 519A00010758



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Division of Corporations

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Yvette Scott  
Document Specialist II

Letter Number: 519A00010758

RECEIVED  
JUN 24 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 24 / 7 Automotive Performance LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christopher Chase

Name of Person

24 / 7 Automotive Performance LLC

Firm/Company

P O Box 224

Address

Angel Fire NM 87710

City/State and Zip Code

donnaHolman@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Holman

305

613-3105

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy



\$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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TALLAHASSEE, FLORIDA

FILED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 24 / 7 Automotive Performance LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. New Mexico 3. 27-0720823  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3950 NW 167th Street 6. P O Box 224  
(Street Address of Principal Office) (Mailing Address)  
Miami FL 33054 Angel Fire NM 87710

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Christopher Chase  
Office Address: 3950 NW 167th Street  
Miami 33054  
(City) , Florida (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

x Christopher Chase  
(Registered agent's signature)

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TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:

☒ Manager Name: Christopher Chase

☒ Member Address: P O Box 224

☐ Authorized Address: Angel Fire NM 87710

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: Donna Holman

☒ Member Address: P O Box 224

☐ Authorized Address: Angel Fire NM 87710

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

Title or Capacity: Name and Address:

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_


Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X   
\_\_\_\_\_  
Signature of an authorized person

Christopher S. Chase  
\_\_\_\_\_  
Typed or printed name of signee

**OFFICE OF THE SECRETARY OF STATE**  
**NEW MEXICO**

***Certificate of Good Standing and Compliance***

IT IS HEREBY CERTIFIED THAT:

**24/7 AUTOMOTIVE PERFORMANCE L.L.C.**  
**4207791**

the above named entity, a Company organized under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Limited Liability Company, under the

**Limited Liability Company Act**

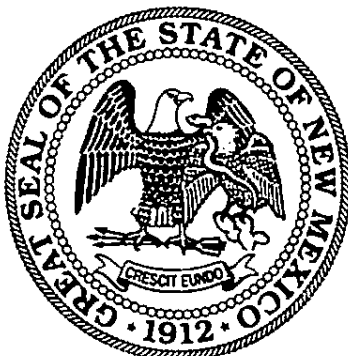
**53-19-1 to 53-19-74 NMSA 1978**

having filed its Articles of Organization on August 5, 2009, and Certificate of Organization issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: **June 6, 2019**

**In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.**



*Maggie Toulouse Oliver*

**Maggie Toulouse Oliver**  
**Secretary of State**

**Certificate Validation #: 0029937**

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Validation option on the Business Filing System at <https://portal.sos.state.nm.us/bfs/online> and following the instructions displayed under Certificate Validation.



OFFICE OF THE SECRETARY OF STATE  
NEW MEXICO

June 6, 2019

**Business ID #:** 4207791

**Entity Name:** 24/7 AUTOMOTIVE PERFORMANCE L.L.C.

**Filing History**

Instrument Number: **4207791**  
Filed Date: **08/05/2009**  
Instrument Type: **Certificate Of Organization**  
Instrument Text: **24/7 AUTOMOTIVE LLC 3PGS PERPETUAL**

Instrument Number: **4207791**  
Filed Date: **04/07/2010**  
Instrument Type: **Certificate Of Amendment**  
Instrument Text: **CNT <24/7 AUTOMOTIVE PRERFORMANCE L.L.C.>  
(2 PG)**

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